

APPLICATION DATA SHEET

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | |
| Number of CD Disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | Yes |
| Computer Readable Form (CRF)?:: | Yes |
| Number of Copies of CRF:: | 1 |
| Title:: | Gene Therapy For Critical Limb Ischemia With Wild Type or Mutant eNOS |
| Attorney Docket Number:: | 52339AUSM1 |
| Request for Early Publication:: | |
| Request for Non-Publication?:: | |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 28 |
| Small Entity:: | |
| Petition Included?:: | |
| Petition Type:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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|-------------------------------|---------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | Full Capacity |
| Given Name:: | William |
| Middle Name:: | P. |
| Family Name:: | Dole |

Name Suffix::
City of Residence:: Alamo
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 65 Childers Lane
City of Mailing Address:: Alamo
State or Province of Mailing Address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94507

Applicant Authority Type:: Inventor
Primary Citizenship Country:: HU
Status:: Full Capacity
Given Name:: Katalin
Middle Name::
Family Name:: Kauser
Name Suffix::
City of Residence:: El Sobrante
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1299 Raton Ct.
City of Mailing Address:: El Sobrante
State or Province of Mailing Address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94803

Applicant Authority Type:: Inventor
Primary Citizenship Country:: CN
Status:: Full Capacity
Given Name:: Hu Sheng
Middle Name::

Family Name:: Qian
Name Suffix::
City of Residence:: Walnut Creek
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3108 Stinson Circle
City of Mailing Address:: Walnut Creek
State or Province of Mailing Address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94598

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Gabor
Middle Name::
Family Name:: Rubanyi
Name Suffix::
City of Residence:: Alamo
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2426 Heritage Oaks Drive
City of Mailing Address:: Alamo
State or Province of Mailing Address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94507

Correspondence Information

Correspondence Customer Number:: 27586
Phone Number:: (510) 669- 4758, (510) 262-5411,
(510) 669-4699, (510) 669-4290,

(510) 669-4483
Fax Number:: (510) 262-7095
E-Mail Address:: anna_gil@berlex.com
wendy_washtien@berlex.com
neil_miyamoto@berlex.com
melissa_shaw@berlex.com
ron_hermenau@berlex.com

Representative Information

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| Representative Customer Number:: | 27586 |
|----------------------------------|-------|

Domestic Priority Information

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|------------------|--------------------|----------------------|----------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | Non-Provisional of | 60/403,637 | 8/16/2002 |

Foreign Priority Information

Assignment Information

Assignee Name:: Schering Aktiengesellschaft
Street of Mailing Address::
City of Mailing Address:: Berlin
State or Province of Mailing Address:
Country of Mailing Address:: Germany
Postal or Zip Code of mailing address:: D13342